# to Maricopa Integrated Health Systems Health Plans

Welcome

Maricopa Integrated Health Systems Health Plans (MIHS-HP) is a division of the Maricopa Integrated Health System (MIHS) and is responsible for providing covered services to a growing number of Arizona residents. Your professional skills, together with those of other health care professionals, are essential in providing quality cost-effective care to our members.

MIHS-HP has developed the MIHS-HP Provider Manual to assist you in providing care to MIHS-HP members and in obtaining reimbursement for those services. We hope that you will find the manual a useful reference tool for working with MIHS-HP and its members. MIHS-HP will forward to you changes and updates to the manual as they occur.

The MIHS-HP Provider Manual is available on disc in MicroSoft Word 97 format. If your office would like a copy on disk, please contact Provider Services at 602/344-8957.

MIHS-HP expects that all contracted providers will review the MIHS-HP Provider Manual. Any questions, concerns, or suggestions regarding the manual are encouraged and should be directed to a Provider Services Representative at 602-344-8957.

Thank you for your participation in the Maricopa Integrated Health Systems Network.

## **Table of Contents**

Welcome Page	i
Table of Contents	
MIHS-HP Important Phone Numbers and Guidelines	iii
Section One	
MIHS-HP Overview	1.1
MIHS-HP	1.1
MIHS-HP Plan Grid	
MIHS-HP Organizational Chart	
MIHS-HP Mission, Vision, Goals and Values	
MIHS-HP Philosophy of Care	
MIHS-HP Code of Ethics,	
MIHS-HP Confidentiality Statement	
Provider Services	
Member Services	
Section Two	
Glossary of Terms	2.1
Section Three	
Primary Care Provider Responsibilities	3.1
PCP Accessibility/Availability Standards	
MIHS-HP Plan Descriptions	
Section Four	
Maricopa County Health Plan (MCHP)	<b>4</b> 1
Section Five	T. I
Maricopa Long Term Care Plan (MLTCP)	5.1
Outside Service Request (OSR) Form	
Certificate of Medical Necessity Sample Form	
Service Authorization Form (SAF) Sample	
Section Six	3.10
Maricopa Senior Select Plan (MSSP)	6.1
Section Seven	0. 1
Health Select	7 1
Section Eight	
Kids Care	0.1
Section Nine	0. 1
	0.1
EPSDT Program (Early and Periodic Screening, Diagnosis, and Treatment)  Section Ten	9.1
	10.1
Prior Authorization	10.1
Section Eleven	44.4
Claims and Encounter Reporting	
Sample HCFA Form	
Sample UB92 Form	11.16
Section Twelve	40.4
MIHS-HP Dental Plan	12.1
Section Thirteen	40.4
Non-Emergent Transportation	13.1
Section Fourteen	
MIHS-HP Outpatient Formulary (as of 7/1/99)	14.1
Section Fifteen	
Fraud and Abuse	15.1

## **Table of Contents (cont.)**

Section Sixteen	
Grievance and Appeals	
Section Seventeen	
Advance Directives	
Section Eighteen	
Utilization Management	
Section Nineteen	
Behavioral Health	19.1
Section Twenty	
Maternal/Child Health	20.1
Section Twenty – One	
Specialists Responsibilities	21. <sup>-</sup>
Section Twenty – Two	22.1
Forms	
Section Twenty - Three	23.1
Proposistion 204	

### **Important Phone Numbers and Contact Guidelines**

PLEASE READ THE FOLLOWING INSTRUCTIONS CAREFULLY AND POST ALONG WITH THE KEY CONTACT LIST.

#### **MLTCP Case Management**

Changes in member's health or level of function Problems with the member and/or the family

The member requires additional equipment or services, including behavioral health

The member enters and returns from the hospital or nursing facility. The member wants to move to another home or setting

#### **Authorization/Referral**

The member needs transportation to regular medical appointments. Medical emergencies **after normal business hours** that do not warrant 911.

Medical information or a change of condition occurs during the evening or the weekend when the PCP is not available.

#### **Claims**

Instances of incorrect payments Explanations of denials

Claim status checks

Instructions on how to complete claim forms

General claims questions

#### **Member Services**

Benefit explanations

Problems, complaints, and grievances

Verifying member eligibility Member PCP changes

Member address, phone, or name changes

#### **Provider Services**

Policy questions Contract issues

General financial issues

Provider demographic changes Provider termination/panel closures

Provider training/education

## Important Phone Numbers (Listed by department in alpha order)

Arizona Long Term Care System (MLTCP) Case Central Valley Office East Valley Office West Valley Office	Management 602/344-8755 480/497-6400 602/344-8600
Central Valley Fax East Valley Fax West Valley Fax	602/344-8751 480/497-3820 602/678-1810
Authorizations/Referrals Authorization 24 Hour Number Fax Medical Services Fax	602/344-8111 602/344-8706 602/344-8706
Behavioral Health Behavioral Health Fax	602/344-8755 602/344-8751
Business Systems Business Systems Fax	602/344-8550 602/344-8823
Claims Research Claims Fax	602/344-8555 602/344-8460
Member Services  Member Services  Toll Free Number  Fax	602/344-8760 800/582-8686 602/344-8515
Non-Emergent Transportation Fax	602/344-7402 602/344-8515
Pharmacy Authorization Pharmacy Authorization Fax	602/344-8451 602/344-8858
Provider Services Provider Services Fax	602/344-8957 602/344-8933
Utilization/Medical Case Management Utilization/Medical Case Management Fax	602/344-8310 602/344-8348